

SECOND REGULAR SESSION

# HOUSE BILL NO. 1998

## 96TH GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVE FRANZ.

6269L.011

D. ADAM CRUMBLISS, Chief Clerk

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### AN ACT

To repeal sections 143.790, 302.302, and 302.291, RSMo, and to enact in lieu thereof seven new sections relating to health care services and fees, with penalty provisions.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Sections 143.790, 302.302, and 302.291, RSMo, are repealed and seven new sections enacted in lieu thereof, to be known as sections 143.789, 143.790, 302.302, 302.291, 304.890, 304.892, and 304.894, to read as follows:

**143.789. The director of the department shall have the authority to impose an offset against a refund owed to any taxpayer for the following items and in the following order of priority:**

**(1) Delinquent taxes owed by the taxpayer to the state of Missouri;**

**(2) Debts owed by such taxpayer to any state agency or support obligation owed by such taxpayer which is enforced by the division of family services on behalf of a person who is receiving support enforcement services under section 454.425;**

**(3) Collection assistance fees authorized under section 143.790;**

**(4) Eligible claims under section 143.790; and**

**(5) Delinquent taxes owed by the taxpayer to the United States.**

143.790. 1. [Any hospital or health care provider who has provided health care services to an individual who was not covered by a health insurance policy or was not eligible to receive benefits under the state's medical assistance program of needy persons, Title XIX, P.L. 89-97, 1965 amendments to the federal Social Security Act, 42 U.S.C. Section 301, et seq., under chapter 208, RSMo, and the health insurance for uninsured children under sections 208.631 to 208.657, RSMo, at the time such health care services were administered, and such person has

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

7 failed to pay for such services for a period greater than ninety days, may submit a claim to the  
8 director of the department of health and senior services for the unpaid health care services. The  
9 director of the department of health and senior services shall review such claim. If the claim  
10 appears meritorious on its face, the claim for the unpaid medical services shall constitute a debt  
11 of the department of health and senior services for purposes of sections 143.782 to 143.788, and  
12 the director may certify the debt to the department of revenue in order to set off the debtor's  
13 income tax refund. Once the debt has been certified, the director of the department of health and  
14 senior services shall submit the debt to the department of revenue under the setoff procedure  
15 established under section 143.783.

16         2. At the time of certification, the director of the department of health and senior services  
17 shall supply any information necessary to identify each debtor whose refund is sought to be set  
18 off pursuant to section 143.784 and certify the amount of the debt or debts owed by each such  
19 debtor.

20         3. If a debtor identified by the director of the department of health and senior services  
21 is determined by the department of revenue to be entitled to a refund, the department of revenue  
22 shall notify the department of health and senior services that a refund has been set off on behalf  
23 of the department of health and senior services for purposes of this section and shall certify the  
24 amount of such setoff, which shall not exceed the amount of the claimed debt certified. When  
25 the refund owed exceeds the claimed debt, the department shall send the excess amount to the  
26 debtor within a reasonable time after such excess is determined.

27         4. The department of revenue shall notify the debtor by certified mail the taxpayer whose  
28 refund is sought to be set off that such setoff will be made. The notice shall contain the  
29 provisions contained in subsection 3 of section 143.794, including the opportunity for a hearing  
30 to contest the setoff provided therein, and shall otherwise substantially comply with the  
31 provisions of subsection 3 of section 143.784.

32         5. Once a debt has been set off and finally determined under the applicable provisions  
33 of sections 143.782 to 143.788, and the department of health and senior services has received  
34 the funds transferred from the department of revenue, the department of health and senior  
35 services shall settle with each hospital or health care provider for the amounts that the  
36 department of revenue set off for such party. At the time of each settlement, each hospital or  
37 health care provider shall be charged for administration expenses which shall not exceed twenty  
38 percent of the collected amount.

39         6. Lottery prize payouts made under section 313.321, RSMo, shall also be subject to the  
40 setoff procedures established in this section and any rules and regulations promulgated thereto.

41         7. The director of the department of revenue shall have priority to offset any delinquent  
42 tax owed to the state of Missouri. Any remaining refund shall be offset to pay a state agency

43 debt or to meet a child support obligation that is enforced by the division of family services on  
44 behalf of a person who is receiving support enforcement services under section 454.425, RSMo.

45 **8.] As used in this section, the following terms shall mean:**

46 **(1) "Appeals committee", a committee consisting of at least three people appointed**  
47 **by a provider to hear patient appeals of review officer rulings:**

48 **(a) That the provider has a valid claim;**

49 **(b) Regarding the amount of the claim;**

50 **(c) That a claim qualifies as an eligible claim under this section;**

51 **(2) "Collection assistance fee", a fee in the amount of fourteen dollars payable to**  
52 **the general fund of this state for each debt setoff being processed and an additional**  
53 **seventeen dollars payable to the claim clearinghouse for each debt being processed by the**  
54 **claim clearinghouse shall be recovered from each eligible claim to recover the costs**  
55 **incurred in collecting debts under this section;**

56 **(3) "Court", the supreme court, court of appeals, or any circuit court of the state,**  
57 **or any of their judicially or legislatively created subdivisions;**

58 **(4) "Department", the department of revenue;**

59 **(5) "Claim", a claim by a provider to receive payment of fifty dollars or more for**  
60 **health care services provided by such provider to a patient which has not been paid in**  
61 **whole or in part by the patient or third party payer for more than ninety days after the**  
62 **date the patient was first billed for such health care services;**

63 **(6) "Claim clearinghouse", the entity selected by the department to receive and**  
64 **submit eligible claims on behalf of a provider in accordance with this section. The claim**  
65 **clearinghouse shall be selected by the department through use of and in compliance with**  
66 **the applicable requirements of chapter 34;**

67 **(7) "Health care services", any services that a provider renders to a patient in the**  
68 **course of such provider's furnishing of ambulance services to the patient. Health care**  
69 **services shall include, but not be limited to, treatment of patients and transporting of**  
70 **patients incidental or pursuant to the delivery of ambulance services by a provider or in**  
71 **furtherance of the purposes for which such provider is organized and licensed, provided**  
72 **that with respect to ground ambulance services provided by a provider that is not owned**  
73 **and operated by a city, county, municipality, political subdivision, governmental entity, or**  
74 **an entity that is exempt from federal and state income taxation, health care services shall**  
75 **only include those ground ambulance services provided by the provider that qualify and**  
76 **emergency services as defined in section 190.100 and are provided under the terms of an**  
77 **agreement between the provider and a city, county, municipality, political subdivision, or**  
78 **a governmental entity under section 190.105;**

79           (8) "Patient", an individual who has received health care services from a provider  
80 and who was not, at the time such health care services were provided, eligible to receive  
81 benefits under the state's medical assistance program for needy persons under chapter 208  
82 and the health insurance for uninsured children under sections 208.631 to 208.657;

83           (9) "Provider", any provider of ambulance services licensed by the Missouri  
84 department of health and senior services in accordance with chapter 190, to include but  
85 not be limited to any provider of air ambulance services licensed under section 190.108 and  
86 any provider of ground ambulance services licensed under section 190.109;

87           (10) "Refund", a patient's Missouri income tax refund which the department  
88 determines to be due under the provisions of this chapter;

89           (11) "Review officer", a person designated by a provider to review claims, at the  
90 request of a patient, to determine whether such provider has a valid claim, the amount of  
91 such claim, and whether such claim qualifies as an eligible claim under this section.

92           2. Prior to submission of a claim to the claim clearinghouse, a provider shall send  
93 written notice to a patient that such provider intends to submit a claim to the claim  
94 clearinghouse for collection by setoff under this section. The notice shall:

95           (1) Provide the basis for the claim;

96           (2) State that the provider intends to request that the department apply the  
97 patient's refund against the claim;

98           (3) State that a collection assistance fee will be added to the claim if it is submitted  
99 for setoff;

100           (4) Inform the patient of the right to contest the validity or amount of such claim  
101 by filing a request for a review with the provider; and

102           (5) State the time limit and procedure for requesting such review, and that failure  
103 to request a review within thirty days following receipt of the notice required under this  
104 section shall result in submission of the claim to the claim clearinghouse for setoff of the  
105 debt by the department.

106           3. Upon receipt of the notice required under subsection 2 of this section, any patient  
107 seeking review of a claim with the provider shall file a written request for review within  
108 thirty days of receipt of such notice. A request for a review shall be deemed filed when  
109 properly addressed and delivered to the United States Postal Service for mailing with  
110 postage prepaid. A review officer shall be appointed by the provider to review such claim.  
111 In reviewing a claim, any issue that has previously been litigated in a court proceeding  
112 shall not be considered by the review officer. If the patient seeks a review of the claim and  
113 the review officer finds either that the claim is invalid or the claim does not qualify as an  
114 eligible claim under this section, the review officer's determination shall be final and

binding on the provider and such provider shall have no right to appeal such determination. If all or part of the claim is found by the review officer to be valid and eligible for setoff under this section, the review officer shall notify the provider and the patient of such fact. Such notice shall:

(1) Inform the patient that the patient has the right to appeal the review officer's determination by filing an appeal with the appeals committee;

(2) State the time limit and procedure for requesting such an appeal; and

(3) State that failure to request the appeal within thirty days following receipt of the notice required under this subsection shall result in submission of the claim to the claim clearinghouse for setoff of the debt by the department.

4. Upon receipt of the notice required under subsection 3 of this section, any patient seeking an appeal of a determination of a review officer under this section shall file a written request for such appeal within thirty days following receipt of such notice. An appeal shall be deemed filed when properly addressed and delivered to the United States Postal Service for mailing with postage prepaid. An appeal of a review officer's determination shall be heard by an appeals committee. In an appeal under this section, any issue that has been previously litigated in a court proceeding shall not be considered. A decision made after an appeal under this section shall determine whether a claim is owed to the provider, the amount of the claim, and whether the claim is an eligible claim under this section.

5. If the appeals committee finds a claim to be invalid or otherwise ineligible under this section, the decision of the appeals committee shall be final and binding on the provider and may not be appealed by the provider. If all or part of the claim is found by the appeals committee to be valid and eligible for setoff under this section, the appeals committee shall notify the provider and the patient of such fact. Such notice shall:

(1) Inform the patient that the patient has the right to challenge the appeals committee determination by notifying the provider that it disagrees with the determination and advising the provider as to the basis of such disagreement;

(2) State that the patient must notify the provider of the challenge within ninety days of the patient's receipt of the notice from the appeals committee;

(3) Advise the patient that if the patient challenges the appeals committee's determination under this subsection, the provider will not be permitted to setoff the provider's claim against the patient's refund under this section unless and until the provider files suit against the patient in court seeking a determination that the provider's claim is valid regarding the amount of the claim and that the claim is eligible for setoff under this section, and the court determines that the provider's claim is valid, the amount

151 of the provider's claim, and that provider's claim is eligible for setoff under this section;  
152 and

153 (4) Advise the patient that if the patient does not challenge the appeal committee's  
154 determination under this subsection, the provider will submit the claim to the claim  
155 clearinghouse for setoff by the department under this subsection.

156 6. If the provider prevails in the lawsuit filed under subsection 5 of this section, the  
157 provider may submit the claim to the claim clearinghouse for setoff by the department  
158 under this section. If the patient prevails in the lawsuit filed by the provider under  
159 subsection 5 of this section, the provider shall be:

160 (1) Forever barred from submitting the claim to the claim clearinghouse for setoff  
161 by the department under this section;

162 (2) Forever barred from taking any other steps to collect the amount of the claim  
163 from the patient; and

164 (3) Obligated to reimburse the patient for court costs and attorney's fees associated  
165 with the lawsuit filed under subsection 5 of this section.

166 7. Any provider may submit a claim to the claim clearinghouse for review. In  
167 connection with its submission of a claim to the claim clearinghouse, the provider,  
168 whenever possible, shall provide the claim clearinghouse with the patient's full name,  
169 Social Security number, address, and any other identifying information that the  
170 department advises the claim clearinghouse is necessary for the department to setoff the  
171 claim under this section. The provider shall also provide the claim clearinghouse with  
172 information demonstrating the provider's compliance with the requirements of this section  
173 with respect to the claim.

174 8. If the claim clearinghouse receives sufficient evidence that a provider has fully  
175 complied with the requirements of this section and finds the claim valid, the claim shall be  
176 deemed eligible for setoff by the department under this section and shall be forwarded to  
177 the department. In connection with its submission of the claim to the department, the  
178 claim clearinghouse, whenever possible, shall provide the department with the patient's full  
179 name, Social Security number, address, and any other identifying information that the  
180 department advises the claim clearinghouse is necessary for the department to setoff the  
181 claim under this section.

182 9. If the claim clearinghouse determines that the provider has failed to comply with  
183 any applicable requirements in this section or that the claim is not valid, the claim  
184 clearinghouse shall return the claim to the provider.

185 10. If the department determines that a patient identified by a provider in an  
186 eligible claim filed with the department is entitled to a refund, the department shall notify

the claim clearinghouse that a refund is available for setoff and the amount of such refund, and whether the refund results from a joint or combined return. Notwithstanding any provision of section 32.057 and any other confidentiality statute of this state to the contrary, the department may provide the claim clearinghouse with all information necessary to accomplish and carry out the provisions of this section and section 143.789, but shall not provide the claim clearinghouse with any information whose disclosure is prohibited by Section 6103(d) of the Internal Revenue Code of 1986, as amended. The information obtained by the claim clearinghouse from the department in accordance with this section and section 143.789 shall retain its confidentiality and shall only be used by the claim clearinghouse for the purpose described in this section and section 143.789.

11. (1) At that time, the department shall also notify the patient by regular mail that setoff against the patient's tax refund has been authorized under this section. The notice shall include the following information:

- (a) The amount of the eligible claim and the name of the provider seeking setoff;
- (b) That a setoff to the patient's refund against the eligible claim has been performed; and
- (c) Any amount of the refund remaining after the offset of the eligible claim.

(2) In the case of a joint or combined return, the notice shall also state the name of the nonobligated taxpayer named in the return, if any, against whom no claim is asserted, the fact that no claim is asserted against such taxpayer, and the fact that such taxpayer is entitled to receive a refund if it is due the taxpayer regardless of the claim asserted against the taxpayer's spouse. In order to obtain the refund due the taxpayer, the taxpayer shall apply in writing for an apportionment of the refund with the department within thirty days of the date of receipt of the notice unless, in anticipation of the setoff of the taxpayer's spouse's refund, such nonobligated taxpayer provided the department with a request for apportionment of the anticipated refund which was filed at the same time the original tax return was filed, in which case the department shall determine the apportionment of the refund and forward the determination of apportionment and the nonobligated taxpayer's portion of the refund to the nonobligated taxpayer within fifteen working days of the transfer of the obligated taxpayer's portion of the refund to the claim clearinghouse. Unless a request for apportionment of the anticipated refund was provided to the department as provided in this section, within ninety days after the filing of such taxpayer's application for apportionment of the refund with the department a determination of apportionment shall be mailed to the nonobligated taxpayer by the department. The apportionment of the refund shall be final upon the expiration of thirty days from the date on which the determination of apportionment is mailed to the

223 nonobligated taxpayer unless, within such thirty-day period, the nonobligated taxpayer  
 224 applies in writing for a hearing with the department.

225       **12. The department shall then pay to the claim clearinghouse the amount that the**  
 226 **department has setoff for such provider, which shall include the collection assistance**  
 227 **allocable to the claim clearinghouse. In the event the department is unable to setoff the**  
 228 **entire eligible claim and collection assistance fee under this section, the setoff of the**  
 229 **collection assistance fee shall have priority over the setoff of the eligible claim. If, after the**  
 230 **department has paid to the claim clearinghouse the amount that the department has setoff**  
 231 **for the provider, the provider is found not to have complied with any applicable**  
 232 **requirement of this section, the provider shall send to the patient the entire amount of the**  
 233 **claim offset by the department for the provider plus an amount equal to the collection**  
 234 **assistance fee.**

235       **13. In addition to refunds, lottery prize payouts made under section 313.321 shall**  
 236 **be subject to the setoff procedures established in this section.**

237       **14. The director of the department of revenue and the director of the department of**  
 238 **health and senior services shall promulgate rules and regulations necessary to administer the**  
 239 **provisions of this section. Any rule or portion of a rule, as that term is defined in section**  
 240 **536.010, that is created under the authority delegated in this section shall become effective only**  
 241 **if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section**  
 242 **536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the**  
 243 **general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove**  
 244 **and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority**  
 245 **and any rule proposed or adopted after August 28, 2007, shall be invalid and void.**

302.302. 1. The director of revenue shall put into effect a point system for the  
 2 suspension and revocation of licenses. Points shall be assessed only after a conviction or  
 3 forfeiture of collateral. The initial point value is as follows:

4       (1) Any moving violation of a state law or county or municipal or federal traffic  
 5 ordinance or regulation not listed in this section, other than a violation of vehicle equipment  
 6 provisions or a court-ordered supervision as provided in section 302.303. . . . . 2 points  
 7 (except any violation of municipal stop sign ordinance where no accident is involved. 1 point)

8       (2) Speeding  
 9 In violation of a state law. . . . . 3 points  
 10 In violation of a county or municipal ordinance. . . . . 2 points

11       (3) Leaving the scene of an accident in violation of section 577.060. . . . . 12 points  
 12 In violation of any county or municipal ordinance. . . . . 6 points

13       (4) Careless and imprudent driving in violation of subsection 4 of section

14	304.016.....	4 points
15	In violation of a county or municipal ordinance. ....	2 points
16	(5) Operating without a valid license in violation of subdivision (1) or (2) of subsection	
17	1 of section 302.020:	
18	(a) For the first conviction. ....	2 points
19	(b) For the second conviction. ....	4 points
20	(c) For the third conviction. ....	6 points
21	(6) Operating with a suspended or revoked license prior to restoration of operating	
22	privileges. ....	12 points
23	(7) Obtaining a license by misrepresentation. ....	12 points
24	(8) For the first conviction of driving while in an intoxicated condition or under the	
25	influence of controlled substances or drugs. ....	8 points
26	(9) For the second or subsequent conviction of any of the following offenses however	
27	combined: driving while in an intoxicated condition, driving under the influence of controlled	
28	substances or drugs or driving with a blood alcohol content of eight-hundredths of one percent	
29	or more by weight. ....	12 points
30	(10) For the first conviction for driving with blood alcohol content eight-hundredths of	
31	one percent or more by weight	
32	In violation of state law. ....	8 points
33	In violation of a county or municipal ordinance or federal law or regulation. ....	8 points
34	(11) Any felony involving the use of a motor vehicle. ....	12 points
35	(12) Knowingly permitting unlicensed operator to operate a motor vehicle. .	4 points
36	(13) For a conviction for failure to maintain financial responsibility pursuant to	
37	county or municipal ordinance or pursuant to section 303.025. ....	4 points
38	(14) Endangerment of a highway worker in violation of section 304.585. ...	4 points
39	(15) Aggravated endangerment of a highway worker in violation of section	
40	304.585. ....	12 points
41	(16) For a conviction of violating a municipal ordinance that prohibits tow truck	
42	operators from stopping at or proceeding to the scene of an accident unless they have been	
43	requested to stop or proceed to such scene by a party involved in such accident or by an officer	
44	of a public safety agency. ....	4 points
45	<b>(17) Endangerment of an emergency responder in violation of section</b>	
46	<b>304.894. ....</b>	<b>4 points</b>
47	<b>(18) Aggravated endangerment of an emergency responder in violation of section</b>	
48	<b>304.894. ....</b>	<b>12 points</b>

49           2. The director shall, as provided in subdivision (5) of subsection 1 of this section, assess  
50 an operator points for a conviction pursuant to subdivision (1) or (2) of subsection 1 of section  
51 302.020, when the director issues such operator a license or permit pursuant to the provisions  
52 of sections 302.010 to 302.340.

53           3. An additional two points shall be assessed when personal injury or property damage  
54 results from any violation listed in subdivisions (1) to (13) of subsection 1 of this section and if  
55 found to be warranted and certified by the reporting court.

56           4. When any of the acts listed in subdivision (2), (3), (4) or (8) of subsection 1 of this  
57 section constitutes both a violation of a state law and a violation of a county or municipal  
58 ordinance, points may be assessed for either violation but not for both. Notwithstanding that an  
59 offense arising out of the same occurrence could be construed to be a violation of subdivisions  
60 (8), (9) and (10) of subsection 1 of this section, no person shall be tried or convicted for more  
61 than one offense pursuant to subdivisions (8), (9) and (10) of subsection 1 of this section for  
62 offenses arising out of the same occurrence.

63           5. The director of revenue shall put into effect a system for staying the assessment of  
64 points against an operator. The system shall provide that the satisfactory completion of a  
65 driver-improvement program or, in the case of violations committed while operating a  
66 motorcycle, a motorcycle-rider training course approved by the state highways and transportation  
67 commission, by an operator, when so ordered and verified by any court having jurisdiction over  
68 any law of this state or county or municipal ordinance, regulating motor vehicles, other than a  
69 violation committed in a commercial motor vehicle as defined in section 302.700 or a violation  
70 committed by an individual who has been issued a commercial driver's license or is required to  
71 obtain a commercial driver's license in this state or any other state, shall be accepted by the  
72 director in lieu of the assessment of points for a violation pursuant to subdivision (1), (2) or (4)  
73 of subsection 1 of this section or pursuant to subsection 3 of this section. A court using a  
74 centralized violation bureau established under section 476.385 may elect to have the bureau order  
75 and verify completion of a driver-improvement program or motorcycle-rider training course as  
76 prescribed by order of the court. For the purposes of this subsection, the driver-improvement  
77 program shall meet or exceed the standards of the National Safety Council's eight-hour  
78 "Defensive Driving Course" or, in the case of a violation which occurred during the operation  
79 of a motorcycle, the program shall meet the standards established by the state highways and  
80 transportation commission pursuant to sections 302.133 to 302.137. The completion of a  
81 driver-improvement program or a motorcycle-rider training course shall not be accepted in lieu  
82 of points more than one time in any thirty-six-month period and shall be completed within sixty  
83 days of the date of conviction in order to be accepted in lieu of the assessment of points. Every  
84 court having jurisdiction pursuant to the provisions of this subsection shall, within fifteen days

85 after completion of the driver-improvement program or motorcycle-rider training course by an  
86 operator, forward a record of the completion to the director, all other provisions of the law to the  
87 contrary notwithstanding. The director shall establish procedures for record keeping and the  
88 administration of this subsection.

302.291. 1. The director, having good cause to believe that an operator is incompetent  
2 or unqualified to retain his or her license, after giving ten days' notice in writing by certified mail  
3 directed to such person's present known address, may require the person to submit to an  
4 examination as prescribed by the director. Upon conclusion of the examination, the director may  
5 allow the person to retain his or her license, may suspend, deny or revoke the person's license,  
6 or may issue the person a license subject to restrictions as provided in section 302.301. If an  
7 examination indicates a condition that potentially impairs safe driving, the director, in addition  
8 to action with respect to the license, may require the person to submit to further periodic  
9 examinations. The refusal or neglect of the person to submit to an examination within thirty days  
10 after the date of such notice shall be grounds for suspension, denial or revocation of the person's  
11 license by the director, an associate circuit or circuit court. Notice of any suspension, denial,  
12 revocation or other restriction shall be provided by certified mail. As used in this section, the  
13 term "denial" means the act of not licensing a person who is currently suspended, revoked or  
14 otherwise not licensed to operate a motor vehicle. Denial may also include the act of  
15 withdrawing a previously issued license.

16 2. The examination provided for in subsection 1 of this section may include, but is not  
17 limited to, a written test and tests of driving skills, vision, highway sign recognition and, if  
18 appropriate, a physical and/or mental examination as provided in section 302.173.

19 3. The director shall have good cause to believe that an operator is incompetent or  
20 unqualified to retain such person's license on the basis of, but not limited to, a report by:

21 (1) Any certified peace officer;

22 (2) Any physician, physical therapist or occupational therapist licensed pursuant to  
23 chapter 334; any chiropractic physician licensed pursuant to chapter 331; any registered nurse  
24 licensed pursuant to chapter 335; any psychologist, social worker or professional counselor  
25 licensed pursuant to chapter 337; any optometrist licensed pursuant to chapter 336; **any**  
26 **emergency medical technician licensed pursuant to chapter 190; or**

27 (3) Any member of the operator's family within three degrees of consanguinity, or the  
28 operator's spouse, who has reached the age of eighteen, except that no person may report the  
29 same family member pursuant to this section more than one time during a twelve-month period.  
30 The report must state that the person reasonably and in good faith believes the driver cannot  
31 safely operate a motor vehicle and must be based upon personal observation or physical evidence  
32 which shall be described in the report, or the report shall be based upon an investigation by a law

33 enforcement officer. The report shall be a written declaration in the form prescribed by the  
34 department of revenue and shall contain the name, address, telephone number, and signature of  
35 the person making the report.

36 4. Any physician, physical therapist or occupational therapist licensed pursuant to  
37 chapter 334, any chiropractor licensed pursuant to chapter 331, any registered nurse licensed  
38 pursuant to chapter 335, any psychologist, social worker or professional counselor licensed  
39 pursuant to chapter 337, or any optometrist licensed pursuant to chapter 336, **or any emergency**  
40 **medical technician licensed pursuant to chapter 190** may report to the department any patient  
41 diagnosed or assessed as having a disorder or condition that may prevent such person from safely  
42 operating a motor vehicle. Such report shall state the diagnosis or assessment and whether the  
43 condition is permanent or temporary. The existence of a physician-patient relationship shall not  
44 prevent the making of a report by such medical professionals.

45 5. Any person who makes a report in good faith pursuant to this section shall be immune  
46 from any civil liability that otherwise might result from making the report. Notwithstanding the  
47 provisions of chapter 610 to the contrary, all reports made and all medical records reviewed and  
48 maintained by the department of revenue pursuant to this section shall be kept confidential  
49 except upon order of a court of competent jurisdiction or in a review of the director's action  
50 pursuant to section 302.311.

51 6. The department of revenue shall keep records and statistics of reports made and  
52 actions taken against driver's licenses pursuant to this section.

53 7. The department of revenue shall, in consultation with the medical advisory board  
54 established by section 302.292, develop a standardized form and provide guidelines for the  
55 reporting of cases and for the examination of drivers pursuant to this section. The guidelines  
56 shall be published and adopted as required for rules and regulations pursuant to chapter 536. The  
57 department of revenue shall also adopt rules and regulations as necessary to carry out the other  
58 provisions of this section. The director of revenue shall provide health care professionals and  
59 law enforcement officers with information about the procedures authorized in this section. The  
60 guidelines and regulations implementing this section shall be in compliance with the federal  
61 Americans with Disabilities Act of 1990.

62 8. Any person who knowingly violates a confidentiality provision of this section or who  
63 knowingly permits or encourages the unauthorized use of a report or reporting person's name in  
64 violation of this section shall be guilty of a class A misdemeanor and shall be liable for damages  
65 which proximately result.

66 9. Any person who intentionally files a false report pursuant to this section shall be guilty  
67 of a class A misdemeanor and shall be liable for damages which proximately result.

68        10. All appeals of license revocations, suspensions, denials and restrictions shall be made  
69 as required pursuant to section 302.311 within thirty days after the receipt of the notice of  
70 revocation, suspension, denial or restriction.

71        11. Any individual whose condition is temporary in nature as reported pursuant to the  
72 provisions of subsection 4 of this section shall have the right to petition the director of the  
73 department of revenue for total or partial reinstatement of his or her license. Such request shall  
74 be made on a form prescribed by the department of revenue and accompanied by a statement  
75 from a health care provider with the same or similar license as the health care provider who made  
76 the initial report resulting in the limitation or loss of the driver's license. Such petition shall be  
77 decided by the director of the department of revenue within thirty days of receipt of the petition.  
78 Such decision by the director is appealable pursuant to subsection 10 of this section.

**304.890. As used in sections 304.890 to 304.894, the following terms shall mean:**

2        (1) "Active emergency", any incident occurring on a highway, as the term  
3 "highway" is defined in section 302.010, that requires emergency services from any  
4 emergency responder;

5        (2) "Active emergency zone", any area upon or around any highway, which is  
6 visibly marked by emergency responders performing work for the purpose of emergency  
7 response, and where an active emergency, or incident removal, is temporarily occurring.  
8 This area includes the lanes of highway leading up to an active emergency or incident  
9 removal, beginning within three hundred feet of visual sighting of:

10        (a) Appropriate signs or traffic control devices posted or placed by emergency  
11 responders; or

12        (b) An emergency vehicle displaying active emergency lights or signals;

13        (3) "Emergency responder", any law enforcement officer, paid or volunteer  
14 firefighter, first responder, emergency medical worker, tow truck operator, or other  
15 emergency personnel responding to an emergency on a highway.

**304.892. 1. Upon the first conviction, finding of guilt, or plea of guilty by any**  
2 **person for a moving violation, as the term "moving violation" is defined in section 302.010,**  
3 **or any offense listed in section 302.302, other than a violation described in subsection 2 of**  
4 **this section, when the violation or offense occurs within an active emergency zone, the**  
5 **court shall assess a fine of thirty-five dollars in addition to any other fine authorized by**  
6 **law. Upon a second or subsequent conviction, finding of guilt, or plea of guilty, the court**  
7 **shall assess a fine of seventy-five dollars in addition to any other fine authorized by law.**

8        2. Upon the first conviction, finding of guilt, or plea of guilty by any person for a  
9 speeding violation under either section 304.009 or 304.010, or a passing violation under  
10 subsection 3 of this section, when the violation or offense occurs within an active

11 emergency zone and emergency responders were present in such zone at the time of the  
12 offense or violation, the court shall assess a fine of two hundred fifty dollars in addition to  
13 any other fine authorized by law. Upon a second or subsequent conviction, finding of guilt,  
14 or plea of guilty, the court shall assess a fine of three hundred dollars in addition to any  
15 other fine authorized by law. However, no person assessed an additional fine under this  
16 subsection shall also be assessed an additional fine under subsection 1 of this section.

17 3. The driver of a motor vehicle may not overtake or pass another motor vehicle  
18 within an active emergency zone. Violation of this subsection is a class C misdemeanor.

19 4. The additional fines imposed by this section shall not be construed to enhance  
20 the assessment of court costs or the assessment of points under section 302.302.

304.894. 1. A person commits the offense of endangerment of an emergency  
2 responder for any of the following offenses when the offense occurs within an active  
3 emergency zone:

4 (1) Exceeding the posted speed limit by fifteen miles per hour or more;

5 (2) Passing in violation of subsection 3 of section 304.892;

6 (3) Failure to stop for an active emergency zone flagman or emergency responder,  
7 or failure to obey traffic control devices erected, or personnel posted, in the active  
8 emergency zone for purposes of controlling the flow of motor vehicles through the zone;

9 (4) Driving through or around an active emergency zone via any lane not clearly  
10 designated for motorists to control the flow of traffic through or around the active  
11 emergency zone;

12 (5) Physically assaulting, attempting to assault, or threatening to assault an  
13 emergency responder with a motor vehicle or other instrument;

14 (6) Intentionally striking, moving, or altering barrels, barriers, signs, or other  
15 devices erected to control the flow of traffic to protect emergency responders and motorists  
16 unless the action was necessary to avoid an obstacle, an emergency, or to protect the health  
17 and safety of an occupant of the motor vehicle or of another person; or

18 (7) Committing any of the following offenses for which points may be assessed  
19 under section 302.302:

20 (a) Leaving the scene of an accident in violation of section 577.060;

21 (b) Careless and imprudent driving in violation of subsection 4 of section 304.016;

22 (c) Operating without a valid license in violation of subdivision (1) or (2) of  
23 subsection 1 of section 302.020;

24 (d) Operating with a suspended or revoked license;

25 (e) Driving while in an intoxicated condition or under the influence of controlled  
26 substances or drugs or driving with an excessive blood alcohol content;

27           (f) Any felony involving the use of a motor vehicle.

28           2. Upon a finding of guilt or a plea of guilty for committing the offense of  
29 endangerment of an emergency responder under subsection 1 of this section, if no injury  
30 or death to an emergency responder resulted from the offense, the court shall assess a fine  
31 of not more than one thousand dollars, and four points shall be assessed to the operator's  
32 license pursuant to section 302.302.

33           3. A person commits the offense of aggravated endangerment of an emergency  
34 responder upon a finding of guilt or a plea of guilty for any offense under subsection 1 of  
35 this section when such offense results in the injury or death of an emergency responder.  
36 Upon a finding of guilt or a plea of guilty for committing the offense of aggravated  
37 endangerment of an emergency responder, in addition to any other penalty authorized by  
38 law, the court shall assess a fine of not more than five thousand dollars if the offense  
39 resulted in injury to an emergency responder, and ten thousand dollars if the offense  
40 resulted in the death of an emergency responder. In addition, twelve points shall be  
41 assessed to the operator's license pursuant to section 302.302.

42           4. Except for the offense established under subdivision (6) of subsection 1 of this  
43 section, no person shall be deemed to have committed the offense of endangerment of an  
44 emergency responder except when the act or omission constituting the offense occurred  
45 when one or more emergency responders were responding to an active emergency.

46           5. No person shall be cited for, or found guilty of, endangerment of an emergency  
47 responder or aggravated endangerment of an emergency responder, for any act or  
48 omission otherwise constituting an offense under subsection 1 of this section, if such act or  
49 omission resulted in whole or in part from mechanical failure of the person's vehicle, or  
50 from the negligence of another person or emergency responder.

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